

**GOING OUT OF BUSINESS INFORMATION SHEET
LINCOLN MUNICIPAL CODE CHAPTER 5.22**

**\$15 FEE; PERMIT ISSUED FOR A 60 DAY PERIOD
INVENTORY LIST MUST BE SUPPLIED WITH INFORMATION SHEET & AFFIDAVIT**

RETURN TO:

City Clerk's Office, 555 S. 10th St., Lincoln NE 68508

Please PRINT using blue or black ink only.

APPLICANT'S INFORMATION					
NAME:					
STREET ADDRESS:					
CITY:		STATE:		ZIP:	
PHONE #:		FAX#:			

BUSINESS INFORMATION					
NAME:					
STREET ADDRESS:					
CITY:		STATE:		ZIP:	
PHONE #:		FAX#:			

CONTACT PERSON'S INFORMATION					
NAME:					
STREET ADDRESS:					
CITY:		STATE:		ZIP:	
PHONE #:		FAX#:			

DATE

APPLICANT'S SIGNATURE

These are available on the City's web site at "www.lincoln.ne.gov".

AFFIDAVIT

CITY OF LINCOLN)
COUNTY OF LANCASTER)
STATE OF NEBRASKA) ss:

_____ of lawful age, being first duly
sworn, deposes and says that he/she is the _____ of
_____, which organization owns or has an interest in, or that
he/she himself/herself owns or has an interest in, the inventory of goods attached hereto and filed in
the Office of the City Clerk of the City of Lincoln, Nebraska, pursuant to the requirements of Section
5.22.030 of the Lincoln Municipal Code; that said inventory of goods are proposed to be offered for
sale at _____ commencing _____, 20____; that the
name and address of the supplier of such goods is _____
_____. Further Affiant Says Not.

Signature of Applicant

NOTARY PUBLIC

COUNTY OF _____

STATE OF _____

Subscribed & sworn to as being a true statement, before me, a Notary Public, this _____ day of

_____, 20_____.

Notary Public